

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF ILLINOIS

Case number (if known) \_\_\_\_\_

Chapter you are filing under:

☐ Chapter 7

☒ Chapter 11

☐ Chapter 12

☐ Chapter 13

☐ Check if this an amended filing

Official Form 201

**Voluntary Petition for Non-Individuals Filing for Bankruptcy**

12/15

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name **BT Bourbonnais Care, LLC**

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and *doing business as* names

**DBA Bourbonnais Terrace Nursing Home**

3. Debtor's federal Employer Identification Number (EIN) **45-2827123**

4. Debtor's address Principal place of business

**133 Mohawk Dr.  
Bourbonnais, IL 60914**

Number, Street, City, State & ZIP Code

**Kankakee**

County

Mailing address, if different from principal place of business

P.O. Box, Number, Street, City, State & ZIP Code

Location of principal assets, if different from principal place of business

**c/o TM Healthcare Management  
15443 Summit Ave.  
Oakbrook Terrace, IL 60181**

Number, Street, City, State & ZIP Code

5. Debtor's website (URL) \_\_\_\_\_

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership

☐ Other. Specify: \_\_\_\_\_

7. Describe debtor's business A. Check one:

- ☒ Health Care Business (as defined in 11 U.S.C. § 101(27A))  
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  
☐ Railroad (as defined in 11 U.S.C. § 101(44))  
☐ Stockbroker (as defined in 11 U.S.C. § 101(53AB))  
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))  
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))  
☐ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)  
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)  
☐ Investment advisor (as defined in 15 U.S.C. §80a-3)

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.  
See <http://www.naics.com/search/>.

8. Under which chapter of the Bankruptcy Code is the Debtor filing? Check one:

- ☐ Chapter 7  
☐ Chapter 9

☒ Chapter 11. Check all that apply:

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (amount subject to adjustment on 4/01/16 and every three years after that).  
☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operation, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).  
☐ A plan is being filed with this petition.  
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).  
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11 (Official Form 201A) with this form.  
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?  
☒ No.  
☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?  
☐ No  
☒ Yes.

List all cases. If more than 1, attach a separate list

Debtor	SEE ATTACHED	Relationship to you	_____
District	_____	When	_____
		Case number, if known	_____

11. Why is the case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard?

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other

Where is the property?

Number, Street, City, State & ZIP Code

Is the property insured?

☐ No

☐ Yes. Insurance agency

Contact name

Phone

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> 1-49               | <input type="checkbox"/> 1,000-5,000   | <input type="checkbox"/> 25,001-50,000     |
| <input type="checkbox"/> 50-99              | <input type="checkbox"/> 5001-10,000   | <input type="checkbox"/> 50,001-100,000    |
| <input checked="" type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999            |  |  |

15. Estimated Assets

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> \$0 - \$50,000          | <input checked="" type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion     |
| <input type="checkbox"/> \$50,001 - \$100,000    | <input type="checkbox"/> \$10,000,001 - \$50 million           | <input type="checkbox"/> \$1,000,000,001 - \$10 billion  |
| <input type="checkbox"/> \$100,001 - \$500,000   | <input type="checkbox"/> \$50,000,001 - \$100 million          | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million         | <input type="checkbox"/> More than \$50 billion          |

16. Estimated liabilities

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> \$0 - \$50,000          | <input checked="" type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion     |
| <input type="checkbox"/> \$50,001 - \$100,000    | <input type="checkbox"/> \$10,000,001 - \$50 million           | <input type="checkbox"/> \$1,000,000,001 - \$10 billion  |
| <input type="checkbox"/> \$100,001 - \$500,000   | <input type="checkbox"/> \$50,000,001 - \$100 million          | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million         | <input type="checkbox"/> More than \$50 billion          |

**Request for Relief, Declaration, and Signature**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature  
of authorized  
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on \_\_\_\_\_  
MM / DD / YYYY

**BT Bourbonnais Care, LLC, a Delaware limited  
liability company**

**By: JLM Financial Healthcare, LP, a Texas limited  
partnership, its sole member**

**By: JLM Financial Investments 13, LLC,  
a Texas limited liability company,  
its general partner**

**By: \_\_\_\_\_  
Patrick Laffey, its Manager and  
Designated Representative**

**18. Signature of attorney**

**X**

Date \_\_\_\_\_  
MM / DD / YYYY

\_\_\_\_\_  
Signature of attorney for debtor

**DAVID K. WELCH**

\_\_\_\_\_  
Printed name

**Crane, Heyman, Simon, Welch & Clar**

\_\_\_\_\_  
Firm name

**Suite 3705  
135 South LaSalle Street  
Chicago, IL 60603-4297**

\_\_\_\_\_  
Number, Street, City, State & ZIP Code

Contact phone **312-641-6777** Email address \_\_\_\_\_

**06183621**

\_\_\_\_\_  
Bar number and State

**Burke Warren MacKay & Serritella P.C.**

\_\_\_\_\_  
Firm name

**330 North Wabash Avenue  
Suite 2100  
Chicago, Illinois 60611**

\_\_\_\_\_  
Number, Street, City, State & ZIP Code

Contact phone **312-840-7000** Email address \_\_\_\_\_

**Request for Relief, Declaration, and Signature**

**WARNING --** Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

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MM/DD/YYYY

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liability company**

**By: JLM Financial Healthcare, LP, a Texas limited  
partnership, its sole member**

**By: JLM Financial Investments 13, LLC,  
a Texas limited liability company,  
its general partner**

**By:**

**Patrick Laffey, its Manager and  
Designated Representative**

**18. Signature of attorney**

**X**

Signature of attorney for debtor

Date 10/30/17  
MM/DD/YYYY

**DAVID K. WELCH**  
Printed name

**Crane, Heyman, Simon, Welch & Clair**  
Firm name

**Suite 3705  
135 South LaSalle Street  
Chicago, IL 60603-4297**  
Number, Street, City, State & ZIP Code

Contact phone **312-641-6777** Email address

**06183621**  
Bar number and State

**Burke Warren MacKay & Serritella P.C.**  
Firm name

**330 North Wabash Avenue  
Suite 2100  
Chicago, Illinois 60611**  
Number, Street, City, State & ZIP Code

Contact phone **312-840-7000** Email address

**RELATED BANKRUPTCY CASES FILED**

<b><u>Debtor</u></b>	<b><u>Relationship</u></b>	<b><u>District</u></b>	<b><u>Date Filed</u></b>	<b><u>Case No.</u></b>
CC Care, LLC	Related Entity	Northern District of Illinois	10/30/17	Unknown
CT Care, LLC	Related Entity	Northern District of Illinois	10/30/17	Unknown
FT Care, LLC	Related Entity	Northern District of Illinois	10/30/17	Unknown
JT Care, LLC	Related Entity	Northern District of Illinois	10/30/17	Unknown
KT Care, LLC	Related Entity	Northern District of Illinois	10/30/17	Unknown
SV Care, LLC	Related Entity	Northern District of Illinois	10/30/17	Unknown
TN Care, LLC	Related Entity	Northern District of Illinois	10/30/17	Unknown
WCT Care, LLC	Related Entity	Northern District of Illinois	10/30/17	Unknown
JLM Financial Healthcare, LP	Related Entity	Northern District of Illinois	10/30/17	Unknown

**Fill in this information to identify the case:**

Debtor name **BT Bourbonnais Care, LLC**  
 United States Bankruptcy Court for the: **NORTHERN DISTRICT OF ILLINOIS**  
 Case number (if known): \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 204

### Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Alliance For Living PO Box 4407 Oak Park, IL 60304						\$38,822.00
Allstate - American Heritage Insurance PO BOX 650514 Dallas, TX 75265-0514						\$15,992.70
Arnie Yusim Leasing Inc. 650 Dundee Road Suite 158 Northbrook, IL 60062						\$5,000.00
Cloverleaf Farms Distributors Inc. 13835 S. Kostner Crestwood, IL 60445						\$12,725.76
Constellation - Electric PO BOX 4640 Carol Stream, IL 60197-4640						\$61,032.43
Ecolab PO BOX 70343 Chicago, IL 60673-0343						\$10,472.84
Edward Don & Co. 9801 Adam Don Parkway Woodridge, IL 60517						\$10,031.25
EUBANKS SEWER SERVICE PO BOX 537 Bradley, IL 60915						\$10,787.50

Debtor **BT Bourbonnais Care, LLC**  
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
FERN Office Supplies PO BOX 100895 Atlanta, GA 30384-4174						\$6,886.19
Key Internal Medicine SC DR. DHARAM ANAND PO BOX 715 Bourbonnais, IL 60914						\$5,350.00
MAXXSOURCE 6301 W. Lincoln Ave. West Allis, WI 53219						\$6,032.13
Medline Industries Inc. Dept. CH 14400 Palatine, IL 60055-4400						\$16,585.64
Performance Food Group-TPC 8001 TPC. Road Rock Island, IL 61204-7210						\$63,665.25
Pharmore Drugs LLC 3412 W. Touhy Skokie, IL 60076						\$15,732.34
Physician Care Services, S.C. 8051 186th Street Tinley Park, IL 60487						\$33,952.50
PointClickCare P.O.Box 674802 Detroit, MI 48267						\$30,226.62
Relias & Tsonas LLC 150 S WACKER DR SUITE 1600 Chicago, IL 60606						\$23,772.81
S4 Group LLC 30 N. LaSalle St. Suite 4030 Chicago, IL 60602						\$10,000.00
Stagg Terenzi Confusione & Wabnik 401 Franklin Avenue Suite 300 Garden City, NY 11530						\$57,097.39



Debtor **BT Bourbonnais Care, LLC** Case number (if known) \_\_\_\_\_  
Name

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
United Disposal PO BOX 179 Bradley, IL 60915						<b>\$10,260.00</b>

Acme Complete Parking Lot Surface Inc.  
2016 E. 1000 North Rd.  
Kankakee, IL 60901  
Bourbonnais Fire Protection District  
1080 Armour Rd.  
Bourbonnais, IL 60914  
Constellation - Electric  
PO BOX 4640  
Carol Stream, IL 60197-4640

Aetna  
333 West Wacker Drive  
Chicago, IL 60606  
Briggs Healthcare  
4900 University Avenue  
Suite 200  
West Des Moines, IA 50266  
Constellation - Gas  
Bank of America Lockbox Services  
15246 Collections Center Dr.  
Chicago, IL 60693-0152

Alliance For Living  
PO Box 4407  
Oak Park, IL 60304  
Call One  
PO Box 87618  
Dept.#10278  
Chicago, IL 60680-0618  
Cook County Care  
322 S. Green Street, Suite 400  
Chicago, IL 60607

Allstate - American Heritage Insurance  
PO BOX 650514  
Dallas, TX 75265-0514  
Charles Ovitsky P C  
3500 W. Peterson Ave  
Ste 401  
Chicago, IL 60659-3307  
CPI  
10850 W. Park Place  
Suite 600  
Milwaukee, WI 53224

Alpha Baking Co.  
36230 Treasury Center  
Chicago, IL 60694  
Chemsearch Division  
PO Box 152170  
Irving 75015-2170  
Daniel McNamara  
c/o O'Donnell Haddad LLC  
14044 Petronella Drive, #1  
Libertyville, IL 60048

Alternative Energy Solutions  
PO BOX 129  
Schererville, IN 46375-0129  
Cigna Healthspring  
9701 W. Higgins Road  
Suite 360  
Des Plaines, IL 60018  
De Lage Landen Financial Services  
P.O. BOX 41602  
Philadelphia, PA 19101-1602

Aqua Illinois Inc. - BT  
PO BOX 1229  
Newark, NJ 07101-1229  
Cloverleaf Farms Distributors Inc.  
13835 S. Kostner  
Crestwood, IL 60445  
Dowd, Bloch Bennett Cervone  
Auerbach & Yokich  
8 S. Michigan Ave. 19th Fl  
Chicago, IL 60603

Arnie Yusim Leasing Inc.  
650 Dundee Road  
Suite 158  
Northbrook, IL 60062  
Comcast Cable  
PO BOX 3001  
Southeastern, PA 19398-3001  
e-Health Data Solutions  
PO BOX 385  
Aurora, OH 44202-0385

AT&T  
PO BOX 5080  
Carol Stream, IL 60197-5080  
Comcast Internet  
PO BOX 3001  
Southeastern, PA 19398-3001  
Ecolab  
PO BOX 70343  
Chicago, IL 60673-0343

Case	Doc	Filed	Entered	Page	Desc	Main
Edward Don & Co 9801 Adam Don Parkway Woodridge, IL 60517	17-32411	Doc 1	Filed 10/30/17 Entered 10/30/17 13:34:44	11 of 14	Carden Electric Supply - Kankakee 1200 N. Hebble PO BOX 231 Kankakee, IL 60901-0231	5255 Golf Rd. Skokie, IL 60077-1106
EKS Management 6865 N Lincoln Lincolnwood, IL 60712					Harmony Health Plan 29 North Wacker Drive Suite 300 Chicago, IL 60606-3203	Marlin Business Bank PO Box 13604 Philadelphia, PA 19101-3604
EUBANKS SEWER SERVICE PO BOX 537 Bradley, IL 60915					Hinckley Springs PO BOX 660579 Dallas, TX 75266-0579	MAXXSOURCE 6301 W. Lincoln Ave. West Allis, WI 53219
Family Health Network 322 South Green St. Suite 400 Chicago, IL 60607					HOLLAND & KNIGHT PO BOX 864084 ORLANDO, FL 32886	MedAssure of Indiana 920 E COUNTY LINE RD. STE 102 Lakewood, NJ 08701
FERN Office Supplies PO BOX 100895 Atlanta, GA 30384-4174					Humana 500 W. Main St. Louisville, KY 40202	Medicaid 201 South Grand Avenue East 3rd FL Springfield, IL 62763
First Advantage Tax Consulting Services P.O.Box 404537 Atlanta, GA 30384-4537					IlliniCare Health Plan 999 Oakmont Plaza Drive 4th Floor Westmont, IL 60559	Medline Industries Inc. Dept. CH 14400 Palatine, IL 60055-4400
Fitzsimmons Home Medical Equipment 800 W. 186th Street Tinley Park, IL 60487					Independent Living Systems 5200 Blue Lagoon Drive Suite 500 Miami, FL 33126	Meridian 222 N. LaSalle St., Suite 930 Chicago, IL 60601
Ford Credit PO Box 790093 St. Louis, MO 63179-0093					Key Internal Medicine SC DR. DHARAM ANAND PO BOX 715 Bourbonnais, IL 60914	MidCap Funding IV, LLC 7255 Woodmont Ave. Suite 250 Bethesda, MD 20814
G & G Printing 345 West Broadway Bradley, IL 60915					Kurtz Ambulance Service, Inc. PO BOX 129 New Lenox, IL 60451	Molina 1520 Kensington Road Suite 212 Oak Brook, IL 60523
G. Neil PO BOX 451179 Sunrise, FL 33345-1179					Lifecore Rehab and Counseling Services 8051 W. 186th Street STE.A Tinley Park, IL 60487	MorphoTrust USA 6840 Carothers Parkway Suite 650 Franklin, TN 37067

N B L Textiles Inc  
8830 Lowell Terrace  
Skokie, IL 60076

Case 17-32411 Doc 1 Filed 10/30/17 Entered 10/30/17 13:34:44 Desc Main Document Page 12 of 14  
Personnel Printers Inc  
915 W. Van Buren  
N-3A  
Chicago, IL 60607

Purchase Power  
PO BOX 371874  
Pittsburgh, PA 15250-7874

Next Level  
3019 W. Harrison St.  
Chicago, IL 60612

Pharmore Drugs LLC  
3412 W. Touhy  
Skokie, IL 60076

R L Specialty Co  
PO BOX 904  
Skokie, IL 60076-0904

NICL Laboratories  
306 Era Drive  
Northbrook, IL 60062

Physician Care Services, S.C.  
8051 186th Street  
Tinley Park, IL 60487

Reed's Rent All & Sales, Inc.  
907 North Indiana Ave.  
Kankakee, IL 60901

Nicor Gas  
Bill Payment Center  
PO BOX 5407  
Carol Stream, IL 60197

Physicians Immediate Care - Chicago  
PO Box 8799  
Carol Stream, IL 60197

Rehab Care Group  
680 South Fourth St.  
Louisville, KY 40202

Nutrition Care Systems  
8770 W. Bryn Mawr Ave  
Suite 1300  
Chicago, IL 60631-3515

Pitney Bowes Global Financial Services  
PO BOX 371887  
Pittsburgh, PA 15250-7887

Relias & Tsonas LLC  
150 S WACKER DR  
SUITE 1600  
Chicago, IL 60606

One Step Inc.  
806 W. 4th Street  
Davenport, IA 52802

PointClickCare  
P.O.Box 674802  
Detroit, MI 48267

Rogers Supply Co Inc  
1425 Harvard Dr.  
Kankakee, IL 60901

Optech Orthotics & Prosthetics Services  
119 E Court Street  
Ste 100  
Kankakee, IL 60901

Positive Promotions  
15 Gilpin Ave.  
Hauppauge, NY 11788

Ruder Technologies  
1075 Lesco Rd.  
Kankakee, IL 60901

Pacific Telemanagement Services  
2001 Crow Canyon Road Ste 201  
San Ramon, CA 94583-5388

Precision Piping  
1350 Stanford Dr.  
Kankakee, IL 60901

S4 Group LLC  
30 N. LaSalle St.  
Suite 4030  
Chicago, IL 60602

Performance Food Group-TPC  
8001 TPC. Road  
Rock Island, IL 61204-7210

Presence St. Mary's Hospital  
32813 Collection Center Dr  
Chicago, IL 60683-0328

Secretary of State, License Renewa  
Secretary of State License Renewal  
3701 Winchester Road  
Springfield, IL 62707-9700

Personnel Concepts  
PO BOX 5750  
Carol Stream, IL 60197

Prospect Resources Inc  
8170 N McCormick Blvd  
Suite #107  
Skokie, IL 60076

SEIU Healthcare  
2229 S. Halsted  
Chicago, IL 60608

SEIU Healthcare IL Benefit Fund TM Healthcare Management LLC  
2229 S. Halsted 1S443 Summit Ave.  
Suite 122 Suite 204 A&B  
Chicago, IL 60608 Oakbrook Terrace, IL 60181

SEIU Healthcare Illinois & Indiana United Disposal  
2229 S. Halsted PO BOX 179  
Chicago, IL 60608 Bradley, IL 60915

SEIU LOCAL NO.4 PENSION FUND UnitedHealthcare Insurance Company  
2229 S. Halsted Dept. CH 10151  
Suite 122 Palatine, IL 60055-0151  
Chicago, IL 60608

Sharp Business Systems US Dept of H.U.D. Region V  
Formerly Illinois Business Systems Attn: David Cole, Sr. Acct. Exec.  
Dept CH 14404 77 W. Jackson Blvd., Room 2617  
Palatine, IL 60055 Chicago, IL 60604-3507

Simplex Grinnell Tyco VERIFY  
Dept. CH 10320 206 South Sixth Street  
Palatine, IL 60055-0320 Springfield, IL 62701

Social Security Village of Bourbonnais (BT Sewer)  
630 E. Oak Street Sewer Bill  
Kankanksee, IL 60901-4042 600 Main St. NW.  
Bourbonnais, IL 60914

Socialwork Consulting Group Washtown Equipment Co., Inc.  
1104 Hunter Rd 4036 W. Montrose Ave.  
Glenview, IL 60025 Chicago, IL 60641

Special Care White's Lawn Care  
7444 Wilson Ave 177 S. LaSalle Ave.  
Harwood Heights, IL 60706 Bradley, IL 60915

Stagg Terenzi Confusione & Wabnik Yooshik Jeon  
401 Franklin Avenue 4027 N. Tripp Ave.  
Suite 300 Chicago, IL 60641  
Garden City, NY 11530

**United States Bankruptcy Court  
Northern District of Illinois**

In re BT Bourbonnais Care, LLC

Debtor(s)

Case No.

Chapter 11

**CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)**

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for BT Bourbonnais Care, LLC in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

JLM Financial Healthcare, LP a  
Texas limited partnership, its sole  
member

☐ None [Check if applicable]

10/30/17  
Date

  
DAVID K. WELCH

Signature of Attorney or Litigant  
Counsel for BT Bourbonnais Care, LLC  
Crane, Heyman, Simon, Welch & Clar  
Suite 3705  
135 South LaSalle Street  
Chicago, IL 60603-4297  
312-641-6777 Fax: 312-641-7114